



U.S. Department of Homeland Security
Immigration and Customs Enforcement

970 Broad Street
Newark, NJ 07102

August 25, 2004

SALLA, Momodou
A74 999 048
Hudson County Jail

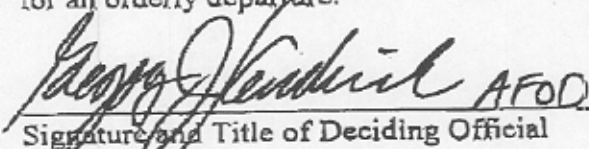
Release Notification

Upon review of your case, the DHS-ICE has concluded that you may be released from ICE custody pending your removal from the United States. This release does not effect your removal order and does not constitute an admission to the United States.

Your release will be subject to certain written conditions that will be provided to you shortly, and by which you must abide. A violation of one of more of these conditions, or of any local, state or federal law, may result in your being taken back into custody and any bond which you may have posted being forfeited. Your release from custody is also conditioned upon your maintaining proper behavior while sponsorship and placement efforts for you are being undertaken.

Prior to your release from custody, an immigration officer will verify the sponsorship or employment offers presented during your review. Please forward any additional information regarding potential sponsoring family members or non-governmental organizations who may be willing to assist you upon release.

It is particularly important that you keep the DHS-ICE advised of your address at all times. We will continue to make efforts to obtain your travel document that will allow the United States government to carry out your removal pursuant to your order of deportation, exclusion, or removal. In addition, you are required by law to continue to make good faith efforts to secure a travel document on your own. Once a travel document is obtained, you will be required to surrender to the DHS-ICE for removal. You will, at that time, be given an opportunity to prepare for an orderly departure.

 AFOD
Signature and Title of Deciding Official

8/25/04
Date

Decision of Post Order Custody Review - Release
Page 2
A74 999 048, SALLA, Momodou

PROOF OF SERVICE

(1) Personal Service (Officer to complete both (a) and (b) below.)

(a) I THOMAS MARGEST, DEPUTATION OFFICER
Name of DHS-ICE Officer Title
certify that I served MOMODOU SALLA with a copy of
this document at 570 HENRI SPALDE CTR. NEWARK, NJ 07114 on 8/26/04 at 12:00 PM
Name of detainee Institution Date Time

(b) I certify that I served the custodian _____
Name of Official
_____, at _____, on _____
Title Institution
_____ with a copy of this document.
Date

OR

(2) Service by certified mail, return receipt. (Attach copy of receipt)

I _____, _____, certify
Name of DHS-ICE Officer Title
that I served _____ and the custodian _____
Name of detainee Name of Official
with a copy of this document by certified mail at _____ on _____
Institution Date

() cc: Attorney of Record or Designated Representative
() cc: A-File

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DHS-ICE

U.S. Department of Homeland Security
Bureau of Immigration and Customs Enforcement

Order of Supervision-AddendumFile No: A74 999 048Date: August 26, 2004Name: SALLA Momodou

☐ That you do not associate with known gang members, criminal associates, or be associated with any such activity.

☐ That you register in a substance abuse program within 14 days and provide the DHS-ICE with written proof of such within 30 days. The proof must include the name, address, duration, and objectives of the program as well as the name of a program counselor.

☐ That you register in a sexual deviancy counseling program within 14 days and provide the DHS-ICE with written proof of such within 30 days. You must provide the INS with the name of the program, the address of the program, duration and objectives of the program as well as the name of a counselor.

☐ That you register as a sex offender, if applicable, within 7 days of being released, with the appropriate agency(s) and provide the DHS-ICE with written proof of such within 10 days.

☒ That you do not commit any crimes while on this Order of Supervision.

☒ That you report to any parole or probation officer on September 21, 2004 and provide the DHS-ICE with written verification of the officers name, address, telephone number, and reporting requirements.

☐ That you continue to follow any prescribed doctors orders whether medical or psychological including taking prescribed medications.

☒ That you provide the DHS-ICE with written copies of requests to Embassies or Consulates requesting the issuance of a travel document.

☒ That you provide the DHS-ICE with written responses from the Embassy or Consulate regarding your request.

☐ Any violation of the above conditions will may result in revocation of your employment authorization document.

☒ Any violation of these conditions may result in you being taken into Service custody and you being criminally prosecuted.

☐ Other: That you report for Parole at:

x M.S.



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DHS-ICE

Outprocessing ChecklistSex Offenders

- ☐ Probation/Parole Officer notified.
- ☐ Registered as sex-offender as required by state statute within 7 days.
- ☐ Victim/Witness Coordinator notified.
- ☐ Victim/Witness notified.
- ☐ Written Proof of Counseling.

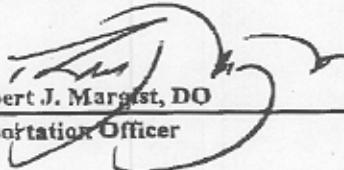
Substance Abusers

- ☐ Probation/Parole Officer notified.
- ☐ Written Proof of Counseling.

All Aliens

- ☐ Parole/Probation Officer notified.
- ☒ Obtain address where living and telephone number.
- ☐ Enter into IDENT
- ☒ NCIC check
- ☒ Travel document application

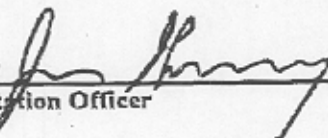
Completed By:


Robert J. Margist, DO
Deportation Officer

August 26, 2004

Date

Concurrence By:


James Shaughnessy
Supervisory Deportation Officer

August 26, 2004

Date